

# CROW TRIBE EXECUTIVE BRANCH

Bacheeitchche Avenue  
P.O. Box 159  
Crow Agency (Baaxuwuaashe). Montana 59022



Education Department

Alvin AJ Not Afraid, Jr. (CHAIRMAN)

Carlson "Duke" Goes Ahead (VICE-CHAIRMAN)

R. Knute Old Crow Sr. (SECRETARY)

Shawn E. Backbone (VICE-SECRETARY)

## Crow Tribe Higher Education Scholarship Program

Provides financial assistance to students who plan on attending a 2 or 4 year accredited institution. Applications are available in late December and the deadline is March 1st for the following academic year. Qualifications are:

- \*Student must be enrolled member of the Crow Tribe
- \*Possess a High School diploma or GED
- \*Pursue an Undergraduate Degree
- \* Be eligible for FAFSA
- \*Carry a minimum of 12 credits
- \*Maintain a 2.0 GPA or higher

Funding ranges from \$3,000 to \$5,000 for the academic year. Funding is based on the student's unmet need.

The Higher Education Program does not recognize vocational/ Technical institutions as institutions of higher learning such as: United Tribes and MSU Vo- Tech(apply to AVT)

Crow Tribal Education Department

P.O. Box 159  
Crow Agency MT 59022  
(406) 679-2143  
(406) 679-3008

Program Director, Roberta Bird

Deadline to submit application for Fall 2020/21 academic school year July 15, 2020 5:00pm

Email:

[Roberta.Bird@crow-nsn.gov](mailto:Roberta.Bird@crow-nsn.gov) or [jenniferoldbull@yahoo.com](mailto:jenniferoldbull@yahoo.com).

**The Great Apsáalooke Nation: "Teepee Capital of the World"**

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## Introduction:

Under the authority of PL. 93-638 of the Indian Self-determination Act effective May 1992, the Crow Tribal Administration contracted with the Bureau of Indian Affairs the BIE (Bureau of Indian Education) Model Contract Scholarship. The following goals have been established for the scholarship program.

To ensure equal access for all tribal members to higher education opportunities'.

To ensure financial assistance that is most beneficial for each individual student,

To ensure fair and uniform services for all students, a committee shall be established for selection of eligible applicants

### Scholarship Committee:

The Crow Tribal Education Scholarship Committee shall be comprised of the Education Cabinet Head, Education Director, (BIE) Scholarship Coordinator, (BIAO) Job placement and Training Coordinator, (BIE) Johnson O'Malley Coordinator, Executive Branch Representative, and a Legislative Branch representative, The Scholarship Committee will meet to make selections for the academic school year, beginning with the fall term of each year. The scholarship Committee shall make the final selection of qualified, eligible application based on the guidelines.

### Eligibility Requirements:

Applicant must

- Be an enrolled member of the Crow Tribe
- Possess a High School diploma or GED
- Be enrolled in at an accredited college or university, including on-line classes
- Be actively pursuing an undergraduate degree Carry a minimum of 12 credits or more
- Maintain a 2.0 GPA on most recent transcript
- Be FAFSA Pell Grant eligible to establish financial need
- Submit a completed scholarship application with ALL required documents

### Priority Classification:

The Crow Tribal Education Department will make every effort to award scholarships to all eligible students with the grant funds received from the Bureau of Indian Education, All completed applications will be prioritized as follows:

1<sup>st</sup> Priority-Continuing students in good academic standing (GPA 2.0 or Higher).

2<sup>nd</sup> Priority-New students who are first time applicants.

3<sup>rd</sup> Priority-Returning students who meet all eligibility requirements (students who have taken some time off from school, for any given reason, and are now returning),

4<sup>th</sup> Priority-Students who have incomplete applications will be placed on a waiting list until all requirements are met before consideration of funding.

### Scholarship Award:

Once a student is approved for a scholarship the Crow Tribal Education Committee, an award amount will be determined. Based on the student's status, the scholarship will be the lessor of the amount as shown or the student's unmet need as indicated on the financial needs analysis:

### Notice of Award:

Upon approval of an award by the Education Committee, notification will be sent to the student stating the amount of the award, the school year, and the college/university of choice.

Any students who meets all eligibility and application requirements will be awarded a scholarship. If for any reason an applicant is not approved for an award, a letter will be sent to the students stating the reason.

### Disbursement of funds:

All scholarship awards for each academic year will be disbursed as follows:

1. Scholarship funds will be disbursed twice a semester. First payment will be disbursed at the beginning of the semester. Second payment will be disbursed at midterm. To monitor student progress, mid-term grades must be submitted before second payment is disbursed. Funds will not be disbursed for those students who are no longer attending classed at mid-term.
2. For quarterly terms, funds will be disbursed three times a year. To monitor students' progress, final grades must be submitted at the end of each quarter. Students must meet all requirements for funding to continue.

Funds will be disbursed to Financial Aid Offices to be processed according to their financial policies and procedures.

### Year Level/Credits:

Student grade levels will be determined as follows:

Year	Semester Credits	Quarter Credits
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If an Associates of Arts plan of study exceeds two years, the scholarship committee will review and may continue funding, but not for a second Associates of Arts Degree Transfer:

If a student is planning on transferring in a given academic year, the student must submit all required documentation from the school that they are planning on transferring to prior to the end of the term. Scholarship amount may change accordingly based upon the unmet need on the financial needs analysis provided by the secondary college.

### Repeating Classes:

The Scholarship Committee will not consider a course taken for a third time as part of the minimum twelve credits.

### Probation:

At the end of a term, a student who does not maintain the minimum 12 credits and a 2.00 grade point average (G.P.A.) will be placed on probation. The student will be notified by letter of the probation status. The student will continue to receive funding in the next term, but must maintain the minimum 12 credits and 2.00 G.P.A.

1/Freshman 0-30	0-36
2/Sophomore 31-60	37-84
3/Junior 61-90	85-132

4/Senior 91-120	133-180
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### Suspension:

A student who has failed to maintain the minimum 12 credits and 2.00 G.P.A. for two consecutive terms will be placed on suspension from the Crow Tribal Scholarship. To be considered for further funding, the student must successfully complete a term with a 2.00 G.P.A. or better and a minimum of 12 semester/quarter credit hours on their own. The student must complete the application process and meet all required deadlines.

### Withdraw:

- I. A student in good standing who plans to withdraw from school or a class must notify the Education Department prior to the end of the term. A written statement indicating the reasons why the student had to withdraw must be submitted. If by withdrawing and failing to earn the minimum 12 credits, the students will be placed on probation.
2. Any student withdrawing without good cause from college voluntarily or involuntarily will be placed on suspension and may be required to reimburse the funds to the Tribal Education Department before consideration can be given for future funding.

### Student Loan:

Crow Tribal Scholarship funds will not pay for previous loans in default.

### Summer Term:

Summer term funding is not guaranteed and approved only if funds are available. Only senior level students who need the summer term to graduate will be funded. A letter of request for summer term funding is due before April 1st. The following additional documentation is due by May 15: Financial needs analysis

Summer term schedule indicating a minimum of 12 credits or the credits needed to graduate Official transcript from the proceeding Spring Term

### Appeal Procedure:

A student has the right to appeal a decision made by the scholarship Committee within ten (10) working days of the receipt of the letter rendering a decision.

The student must appeal in writing and submit any supporting documents to the committee.

The Scholarship Committee will address the appeal during a meeting within then working days 10 of receipt of the appeal.

The student will be notified of the date and has the right to attend the Committee meeting

The student will be notified in writing if the decision made by the Scholarship Committee.

The decision of the Scholarship Committee will be final.

The Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. % 1232g; 34 CFR Part 99) is a Federal law that protects the privacy of student education records. The law applies to all schools that receive funds under an applicable program of the U.S. Department of Education.

FERPA gives parents certain rights with respect to their children's education records. These rights transfer to the student when he or she reaches the age of 18 or attends a school beyond the high school level. Students to whom the rights have transferred are "eligible students."

- Parents or eligible students have the right to inspect and review the student <sup>1</sup>'s education records maintained by the school. Schools are not required to provide copies of records unless, for reasons such as great distance, it is impossible for parents or eligible students to review the records. Schools may charge a fee for copies.

Parents or eligible students have the right to request that a school correct records which they believe to be inaccurate or misleading. If the school decides not to amend the record, the parent or eligible student then has the right to a formal hearing. After the hearing, if the school still decides not to amend the record, the parent or eligible student has the right to place a statement with the record setting forth his or her view about the contested information.

Generally, schools must have written permission from the parent or eligible student in order to release any information from a student's education record. However, FERPA allows schools to disclose those records, without consent, to the following parties or under the following conditions (34 CFR 5 99.31):

- School officials with legitimate educational interest; ○ Other schools to which a student is transferring; ○ Specified officials for audit or evaluation purposes;
- Appropriate parties in connection with financial aid to a student;
- Organizations conducting certain studies for or on behalf of the school;
- Accrediting organizations;
- To comply with a judicial order or lawfully issued subpoena; ○
- Appropriate officials in cases of health and safety emergencies; and ○
- State and local authorities, within a juvenile justice system, pursuant to specific State law.

Schools may disclose, without consent, "directory" information such as a student's name, address, telephone number, date and place of birth, honors and awards, and dates of attendance. However, schools must tell parents and eligible students about directory information and allow parents and eligible students a reasonable amount of time to request that the school not disclose directory information about them. Schools must notify parents and eligible students annually of their rights under FERPA. The actual means of notification (special letter, inclusion in a PTA bulletin, student handbook, or newspaper article) is left to the discretion of each school.

For additional information, you may call 1-800-USA-LEARN (1-800-872-5327) (voice). Individuals who use TDD may use the Federal Relay Service.

Or you may contact us at the following address:  
Family Policy Compliance Office

U.S. Department of Education 400

Maryland Avenue, SW

Washington, D.C. 20202-  
8520

Release of Information

I, \_\_\_\_\_ give Permission for my parents/grandparents

\_\_\_\_\_ to access information from my Crow Tribal Education

students files.

I understand without this release my information is confidential.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Release of Information

I, \_\_\_\_\_ give permission for my parents/grandparents

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Education student files.

I understand without this release my information is confidential.

Signed \_\_\_\_\_ Date \_\_\_\_\_

# Crow Tribal Education Scholarship

Student Applicant Information:

Last Name:

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First Name: \_\_\_\_\_ Middle: \_\_\_\_\_ Other  
Names used:

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Permanent address:

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Alternate address:

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Email:

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Phone number: (\_\_\_\_) \_\_\_\_\_ cell phone: (\_\_\_\_) \_\_\_\_\_ message phone: (\_\_\_\_)

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Social security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Crow Tribal Enrollment Number: \_\_\_\_\_ Gender: male ( ) female: ( )

Veteran: yes ( ) no ( )

Branch: \_\_\_\_\_

Dates of services: \_\_\_\_\_

State of residency: \_\_\_\_\_

Family Information:

Marital status: Single \_\_\_\_\_ Married \_\_\_\_\_ Divorced \_\_\_\_\_ Separated \_\_\_\_\_

Dependents living with applicant:



Name

relationship

Date of Birth

High School Information:

High School Attended: \_\_\_\_\_ Year Graduated \_\_\_\_\_

Address: \_\_\_\_\_

General Education Diploma (GED) received: yes ( ) no ( )

College information:

College/University attending:

Address of College or University:

College or University Phone: ( ) \_\_\_\_\_

College Major: \_\_\_\_\_

Year in college: Freshman ( ) sophomore ( ) Junior ( ) Senior ( )

College/University Entry Date: : \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Enrollment Status: full time (12 credits or more) ( ) part time: (less than 12 credits) ( )

Expected Degree: AA( ) AAS( ) BA( ) BS( )

Expected date of graduation \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Have you received funding from the Crow Tribal Education in the past? (\_\_\_\_) yes (\_\_\_\_) no

When \_\_\_\_\_ which scholarship program? \_\_\_\_\_

Scholarship (\_\_\_\_) Tribal Grant (\_\_\_\_) Job placement & Training (\_\_\_\_) AVT (\_\_\_\_)

Contact person/ College University attending: \_\_\_\_\_

Phone Number:(\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_

### **FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT(FERPA):**

The Family Educational Rights and Privacy Act(FERPA)(20 U.S.C. & 1232g;34 CFR Part 99) is a Federal law that protects the privacy of student education records. The law applies to all schools that receive funds under an applicable program of the U.S. Department of Education. FERPA gives parents certain rights with respect to their children's education records. These rights transfer to the student when he or she reaches the age of 18 or attends a school beyond the high school level.

I \_\_\_\_\_ (student) read the FERPA Law and will abide by this law. I will communicate directly with the Crow Tribe Education Department.

Signature \_\_\_\_\_ Date \_\_\_\_\_

## **RELEASE OF INFORMATION**

### **PRIVACY ACT AND PAPERWORK REDUCTION ACT STATEMENT:**

1. The authority for solicitation of the information on this form is 25 U.S.C. 13 (42 Stat. 208) and P.L. 84-959 (70 stat 986) as amended by L.L. 88-230 (77 Stat. 471, 15 U.S.C. 309).
2. Disclosure of the requested information by the applicant is voluntary but required to receive benefits.
3. The purpose of this information collection is to determine your eligibility for services.
4. The routine use of this information is for the Crow Tribal Education Program to evaluate your application; parts or all of your information in your application will be used for financial and budgeting purposes.

I have read the above statement and I hereby provide the required information and authorize the use of such information to the extent of the uses specified in the statement.

Signature\_\_\_\_\_Date\_\_\_\_\_

### **DISCLOSURE OF PERSONAL INFORMATION:**

Disclosure by you of your social security number, transcript or school grades, medical record, and income verification, veteran's status, legal record, debt, disability evaluations and other information is: CFR 25, 34.2 USC 13 and 309 831 AM 4. The sole purpose of this information is to determine eligibility services.

I AUTHORIZE THE CROW TRIBAL EDUCATION DEPARTMENT THE USE OF INFORMATION LISTED ABOVE:

Signature\_\_\_\_\_Date\_\_\_\_\_

### **STATEMENT OF EDUCATION PURPOSE:**

I declare that I will use all funds I receive under the Crow Tribal Education Scholarship solely for expenses connected with attendance at:

Name of College/University\_\_\_\_\_

I declare that I have read and understand the guidelines for the Crow Tribal Education Scholarship and that the information given is true and complete to the best of my knowledge. I, hereby, authorize the Crow Tribal Education Department to obtain any and all information necessary for the purpose of verifying the statements made. Furthermore, I grant the Crow Tribal Education the ability to release information necessary in assisting me in obtaining other services for which I may be eligible. I understand that I must meet all the eligibility requirements to receive the Crow Tribal Education Scholarship.

Signature\_\_\_\_\_Date\_\_\_\_\_

**Please keep a copy of the complete application for your files and submit the original to:**

**Crow Tribal Education Department  
P. O. Box 159  
Crow Agency, MT 59022**

**Must be post marked on or before July 19<sup>th</sup>, 2020 by 5:00 PM**

**AUTHORIZATION AND AGREEMENT:**

Please sign each section for each quarter/semester of attendance.

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Name of College/University	City	State	Zip code
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I hereby agree to attend the college/university indicated above and to carry at least 14/16 quarter credit hours or 12 semester credit hours each term. I will satisfactorily complete the courses which I have selected. I further agree that funds issued for educational purposes will be so used or repayment will be made to the Crow Tribal Education Scholarship. I understand that the PELL and other funding available to me will be included when computing with my financial aid package, and I agree to use funds for purposes intended. I authorize the college/university to release grades, mid-term progress reports, attendance and financial information to the Crow Tribal Education Department.

Signature\_\_\_\_\_Date\_\_\_\_\_

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## **AUTHORIZATION AND AGREEMENT:**

Please sign each section for each quarter/semester of attendance.

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Signature \_\_\_\_\_ Date \_\_\_\_\_

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Signature \_\_\_\_\_ Date \_\_\_\_\_

## **i. TO BE COMPLETED AND TURNED INTO THE COLLEGE/UNIVERSITY FINANCIAL AID OFFICE BY THE STUDENT:**

Name: \_\_\_\_\_ Social Security No.: \_\_\_\_\_

Home Address: \_\_\_\_\_

Street or P. O. Box \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zipcode \_\_\_\_\_

Year in College \_\_\_\_\_ Major \_\_\_\_\_

Number of dependents: \_\_\_\_\_ this student is considered: independent \_\_\_\_\_ Dependent \_\_\_\_\_

**ii. TO BE COMPLETED BY THE FINANCIAL AID OFFICER:**

This student has applied for the Crow Tribal Scholarship. Verified financial need information is requested from your office before we can take action on the student's application. We appreciate your assistance. Please complete this form and mail the original to the above address or you may give it to the student in a sealed envelope if the student is going to deliver it to our office. Please inform the student it must be delivered sealed.

Budget Period: From \_\_\_\_\_ to: \_\_\_\_\_, which will start \_\_\_\_\_

<b>Expenses</b>		<b>Resources</b>	<b>Campus Based/other Aid</b>
Tuition _____	_____	Tribal Assistance _____	FED PELL _____ Fees
_____	Parent Contribution _____	FED SEOG _____	
Books/Supplies _____		Student Contribution _____	FED PERKINS _____
Room/Board _____		Veteran's Benefits _____	FED CWS _____
Transportation _____		AFDC/Welfare _____	Scholarship _____
Personal _____		Social Security _____	Other _____
Child Care _____		State(Indian) _____	
Other _____		Voc. Rehab _____	
Leveraging Educational Assistance Partnership (LEAP) _____		_____	

Total Expenses \$ \_\_\_\_\_ Total Resources \$ \_\_\_\_\_  
Student Unmet Need or Recommended Amount \$ \_\_\_\_\_  
(Expenses minus Resources)

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Financial Aid Officer	Date	Telephone
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Name of Institute	Address
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# **CROW TRIBAL EDUCATION SCHOLARSHIP**

## **APPLICATION AND REQUIRED DOCUMENTS CHECKLIST**

### **FIRST TIME STUDENT**

- ☐ **A COMPLETED APPLICATION**
- ☐ **PERSONAL LETTER**
- ☐ **CERTIFICATE OF INDIAN BLOOD**
- ☐ **HIGH SCHOOL/GED DIPLOMA**
- ☐ **MOST RECENT COLLEGE TRANSCRIPT**
- ☐ **LETTER OF ACCEPTANCE**
- ☐ **FINANCIAL NEEDS ANALYSIS**
- ☐ **FALL REGISTRATION/CLASS SCHEDULE**

### **RETURNING STUDENTS**

- ☐ **AN UPDATED APPLICATION**
- ☐ **MOST RECENT COLLEGE TRANSCRIPT**
- ☐ **FINANCIAL NEEDS ANALYSIS**
- ☐ **FALL REGISTRATION/CLASS SCHEDULE**

**MAKE SURE THESE ARE COMPLETED WITH THE REQUIRED DOCUMENTS, WE NEED TO COMPLETE YOUR APPLICATION.**

**THANK YOU**

**CROW TRIBAL EDUCATION DEPARTMENT.**